

### **Healing the Whole Person**

While PTSD is the primary focus of this program, deployment involves intense prolonged physical demands, and veterans often suffer from co-morbid physical conditions or concerns. Program participants may have war-related injuries, other injuries or concerns, and/or medically unexplained symptoms. Accordingly, a physician/nurse team provides medical management for these other conditions, while a physical therapist directs a physical reactivation/rehabilitation program for each participant in the Specialized Care Program Track II.

#### Who Can Participate?

The program is designed to treat recent veterans from all Branches of Service who were deployed to Iraq and Afghanistan, who have had significant combat exposure, and who evidence moderate to serious PTSD or related symptoms after appropriate care under the DoD/VA guidelines for depression or PTSD. More severe symptomology will need inpatient treatment (e.g., patients with suicidal or violent ideation, active alcohol or other substance dependence, or unstable medical problems).

#### **How Are Patients Referred?**

The treating physician or designated provider should fax a summary of the case to:

Fax: 202.782.3539 Attn: SCP

Contact DHCC with any referral questions:

Deployment Health Clinical Center Walter Reed Army Medical Center Bldg. 2, 3rd Floor, Room 3G04 6900 Georgia Avenue, N.W. Washington, D.C. 20307-5001

Phone: 202.782.6563

**DSN:** 662.6563 **Fax:** 202.782.3539

DoD Helpline for Service Members, Veterans, and Families: 800.796.9699 (U.S.) 00800.8666.8666 (Europe)

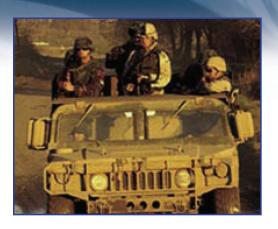
**DHCC Clinicians Helpline:** 866,559,1627

**Email:** PDHealth@na.amedd.army.mil **Web Site:** www.PDHealth.mil



# The Specialized Care Program Track II

Expert, Intensive Care for Combat Veterans



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Deployment Health
Clinical Center





## Meeting the Healthcare Needs of Combat Veterans

Recent research indicates the likelihood that many veterans returning from Iraq and Afghanistan will need assistance recovering from deployment-related stress and other traumatic exposures. While a number of those exposed will recover without formal assistance by relying on personal coping skills and available social support, some will need professional assistance from medical or mental health providers. Many of those who seek help will recover with minimal clinical intervention. Some, however, will continue to experience difficulties even after appropriate primary and secondary care.

The Deployment Health Clinical Center (DHCC) at Walter Reed Army Medical Center offers two programs of intensive, tertiary care for deployment veterans: the Specialized Care Programs Track I and Track II. Employing evidence-based therapies, these comprehensive, three-week programs are delivered by a multidisciplinary staff of deployment-health specialists.

The Specialized Care Program Track I is for service members who continue to experience physical symptoms





following a deployment after having received treatment for their health concerns according to the DoD/VA Post-Deployment Health Evaluation and Management Clinical Practice Guideline.

The Specialized Care Program Track II is for recent combat veterans who continue to experience difficulty adjusting to life after deployment. These veterans may be referred after receiving treatment according to the DoD/VA guidelines for posttraumatic stress disorder (PTSD) or depression.

## The Specialized Care Program Track II

The Specialized Care Program Track II is offered to recently deployed military personnel who, after suitable primary and secondary interventions, are still suffering from symptoms such as:

- Anxiety
- Panic Attacks
- Irritability/Anger
- Depression
- Difficult Family Re-Integration
- Insomnia

## **Program Goals**

The Specialized Care Program Track II is intended to improve the service member's understanding and recognition of the symptoms of PTSD, reduce

stigma, and normalize responses to his or her combat experience. Patients learn to develop coping skills to reduce intrusive symptoms like hyperarousal and avoidance. The program provides a therapeutic group process for mutual support and re-integration into family and community. Other program goals include teaching patients to manage associated PTSD symptoms of depression and grief, helping them to restore their social support systems, and providing mentoring on self-care and how to access available resources.

## Focus on Strength-Based Resiliency

Individuals with PTSD frequently harbor a negative self-image based on a perceived failure to adequately cope with combat stress or with a sense of having let their unit down. In the program, such negative self-images and unrealistic beliefs are directly addressed. Symptoms are re-defined as normal and expected and are characterized as temporary and manageable, rather than chronic or unmanageable. Participants are taught to re-focus on their coping strategies and are encouraged to consider alternative interpretations of their situation, symptoms, and behavior.

